10/658738
Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAMAS			(Column 1)		(Column 2)		1	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			33		L			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			3≯ minus 20=		• /3			X\$ 9=	117	OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		*			X43=		OR	X86=	
M	JLTIPLE DEPE	NDENT CLAIM PI	RESENT					+145=	·	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						į.	TOTAL	502	OR	TOTAL		
þ	RCE CLAIMS AS AMENDED - PART II (Column 2) (Column 3)						_	SMALL	ENTITY	OR	OTHER SMALL	H
AMENDMENTA	03/06/0	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
₹Q2	Total	•33	Minus	<u>#3</u>	3	= Ø		*52	Ø	OR	X\$18=	
AME	Independent	NTATION OF ME	Minus	***	<u> </u>	[- 0		YDO	Ø	OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								TOTAL	395	OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)				• •-		
AMENDWENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•- "	RATE	ADDI- TIONAL FEE
	Total	±	Minus	. **		=		X\$ 9=		OR	X\$18=	
ABBE	Ind pendent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PHESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	-
											TOTAL	
ADDIT, FEE ADDIT, FEE												
		(Column 1)		(Colum		(Column 3)	n "					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
202	Total	#	Minus	0#		= .		X\$ 9=		OR	X\$18=	
E E	Independent	*	Minus	***		=]	X43=	_		X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] }			OR	700-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
If the entry in column 1.5 less than the entry in column 2, write "0" in column 3. *It the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE												
1	The "Highest Num	ber Previously Paid	For" (Total or	Independe	nt) is the	highest numbe	er four	nd in the app	ropriate box	in col	umn 1.	